# Equity, Diversity & Inclusion Discussion with PIAC

Presented by:

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Health Disparities and Equity, Diversity & Inclusion Officer

Executive Directors Office & The Office of Cost Control and Quality Improvement



### Land & Labor Acknowledgement



### Our Mission:

Improving health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado.

#### EDI DISCUSSION QUESTIONS FOR PIAC

- 1. What is the EDI Director's definition of equity? How does this compare to the Department's definition of equity?
- 2. What is the scope of work for this position?
- 3. This position was previously located in the Cost Containment and Quality Improvement Office and is now located in the Executive Director's Office. How does this change affect this position and how the Department is approaching this work?
- 4. How can we achieve both equitable access and outcomes for members? Are these addressed differently?
- 5. Will the EDI work be internal to the Department or include external partners?
- 6. What are concrete actions steps or processes the Department will be taking? What are concrete actions steps or processes PIAC can take?

### Executive Order D 2020 175

On August 27, 2020, Governor Jared Polis signed **Executive Order D 2020 175** to authorize the Department of Personnel and Administration (DPA) to Lead State Action on Diversity, Equity and Inclusion for The State of Colorado.

The State of Colorado believes that an equitable, diverse, and inclusive workplace is one where all employees and community partners, whatever their gender, race, ethnicity, religion, national origin, age, sexual orientation, gender identity, citizenship status, education, disability, socio-economic status, or any other identity, feel valued and respected.

The Department of Health Care Policy and Financing actualized EO 2020 175 in the formation of the **Health Disparities and Equity, Diversity and Inclusion Officer** position as part of executive leadership to champion EDI in the Department and efforts to identify and facilitate the developments of solutions for healthcare disparities.



### **EDI Inventory**

Using the chat feature, please answer the following prompt:

What does equity in healthcare look like to you?

What does diversity mean to you?

What does inclusion look like to you?

### Definitions

**Equity:** When everyone, regardless of who they are or where they come from, has the opportunity to thrive. Equity recognizes that some individuals have an advantage because of their identity, while others face barriers. Unlike equality, which suggests giving the same thing to everyone, equity works to provide opportunities to those facing barriers by providing additional resources to those who do not have these advantages. This requires eliminating barriers like poverty and repairing systemic injustices.

**Diversity:** A description of differences usually based on identities such as race, gender, sexual orientation, class, or ability, etc. Diversity does not equal equity and does not always occur intentionally.

**Inclusion:** What an organization does with diversity to ensure individuals have the opportunity to fully participate. Inclusion intentionally promotes a sense of belonging where people's inherent worth and dignity are recognized and their abilities, qualities, and perspectives are leveraged for the collective good.

Equity, Diversity & Inclusion Universal Policy, DPA (Section III) September 16, 2020

### **Universal Policy**

"There is a collective responsibility to make the State of Colorado an **employer of choice** for people with all identities and abilities — including leadership at all levels. This includes **examining policies**, **practices**, **and procedures** operating in state government today which result in **disparate impacts** on people of color and people with other marginalized identities."

Equity, Diversity & Inclusion Universal Policy, DPA



### My Definition of Equity

- "I feel, therefore I can be free" Audre Lorde
- True liberation is when equity is in the air we breathe, every room we enter, every
  system that is built, to ensure that everyone that we serve, gets what they need in the
  way and how they need it
- Tearing down walls of exclusion and building ladders of opportunities for everyone to thrive
- Moving from survival to thriving
- Anchoring Equity, Diversity and Inclusion at HCPF

Person-centeredness
Accountability
Continuous Improvemen
Employee Engagement
Integrity
Transparency

### Health Equity

Our members have a fair and just opportunity to be as healthy as possible and thrive

Reducing and eliminating disparities and its determinants that adversely affect and exclude marginalized groups and underserved populations

### Guiding Principles: HCPF EDI Plan

Person-Centeredness;
Accountability; Continuous
Improvement; Employee
Engagement; Integrity; and
Transparency

Address health disparities and improve the community of equity and inclusion among HCPF staff

Values-Driven

Intentionality

**Data-Focused** 

Collaboration

Leverage data analytics to inform equity-focused decisions

Co-create, pilot, refine and implement an equity framework and lens

### Health Equity at HCPF

Ensure high quality care and services for underrepresented & underserved communities

 Maximize healthcare investments by working collaboratively with partners to identify and remove obstacles to access & utilization among historically marginalized populations

#### Identify disparities data for marginalized communities

- Inclusive of ability, race & ethnicity, gender, language, sexual orientation, among other protected classes. Focus on intersectionality, ex. race & gender; ability & gender
- Identify gaps in enrollment, utilization, specific diagnostic & treatment codes
- Incorporate disparities data into key dashboards and/or develop equity dashboard



### Scope of Work

Craft the **strategic priorities** and milestones to improve health equity and reduce disparities in care across the populations served by HCPF through Department programs

Leads the development and implementation of **proactive solutions to address health care disparities** as well as EDI strategic plan, initiatives, goals and measurements against goals.

Coordinate with other HCPF divisions and **external partners** to develop approaches to **leverage data** to understand health and outcome disparities in the Medicaid population and diagnose issues and opportunities to develop response strategies.

Provide recommendations, guidance and support to HCPF's Executive Leadership Team on EDI programming, processes, policies and procedures to address healthcare inequities and disparities.

Provide **technical assistance** and **consultation** in designing programs and setting policies that improve health equity and reduce disparities in care

# Executive Director's Office and Office of Cost Control & Quality Improvement

The Health Disparities and EDI Officer is the Department authority to support the overall Department EDI goals while also leading the Department's healthcare disparities work, under the direction of the Department's Chief Medical Officer (CCQI), and EDI strategies within the workforce, under the direction of the Department's Human Resource Director (EDO).

Responsible for providing an in-depth understanding of how these goals and concepts further our strategic priorities and for developing a unique program that integrates EDI into the HCPF culture, business strategies and operations while driving improvements in healthcare disparities to the benefit of our customers.

Working within both The Executive Director's Office and Cost Control and Quality Improvement Office, this position is centered on **operationalizing EDI**, and driving down health disparities through research, partnerships, and community member experience.

### **Executive Director's Office**

The Executive Director's Office (EDO) provides leadership, creates strategic plans, implements those plans, and takes action to optimize internal and external operations.

The Office also leads the effort to craft health policy for the state, improve access and outcomes for the Members we serve and reduce costs associated with Medicaid and CHP, while improving access and outcomes for the members we serve.

#### Office of Cost Control & Quality Improvement

The Office of Cost Control and Quality Improvement exists to focus on the analysis of our efficiency and quality opportunities in utilization, unit cost, quality and overall cost trends inside the Medicaid, Child Health Plan Plus (CHP+), and other health Safety Net programs administered through the Colorado Department of Health Care Policy & Financing.

The Office has been expanded to include Quality and Data Analysis functions to improve goal alignment and to enhance integration efficiencies

### Department Health Equity Plan

On July 6, 2021, Senate Bill 21-181 Equity Strategic Plan Address Health Disparities was signed to direct departments to address health disparities

As part of the Health Equity Commission (HEC), HCPF will develop a Health Equity Plan (Strategic Plan) by June 30, 2022 that focuses on **four priority areas:** 

- ☐ Covid-19 Vaccination Rates
- Maternity and Perinatal Health
- ☐ Behavioral Health
- Preventative Measures

Driven by Social Determinants of Health (SDOH), HCPF's health equity plan will be a comprehensive and robust framework that drives down health disparities and improves health outcomes for members - in coordination with internal and external stakeholders across the State of Colorado

#### Equitable Access & Outcomes For Members

- Socialize the department's health equity plan that is comprehensive, culturally-responsive, and centers equity, diversity, and inclusion that drives down disparities and improves access for all members
  - Data collection needs to be stratified and aligned with expanding quality care
  - Clear definition and actionable steps to address social determinants of health (SDOH)
  - Develop strong partnerships with community members that goes from ideation to implementation
  - Focus on safety net providers (rural and urban centers/clinics)
  - Identify risk adjustment opportunities that leverages health factors of vulnerable and marginalized members
  - Measuring success goes beyond cost savings
  - The most critical: develop and identify ways to actualize coordinated care for client-centered health outcomes
  - Updating our standards that is reflective of growing progress and change with an all hands-on-deck approach

#### Internal and External Focus

- Galvanize the subject matter experts (SME's) across the department (internal) as part
  of the health equity plan and beyond
  - Executive Director's Office
  - Cost Control & Quality Improvement
  - Health Programs
  - Finance
  - Medicaid Operations
  - Pharmacy
  - Policy, Communications and Administration
- Leaning in, and engaging with, external partners that drive program improvement for members
  - Tapping into communities that have historically been marginalized and underserved
  - Intentionally responding to the needs of our clients, their triumphs and areas of concern
  - Proactively streamlining communication that desegregates silos and creates standard opportunities
  - Partner with Regional Accountability Entities (RAE'S) as a key component to driving positive outcomes

#### **Concrete Action Steps**

To truly advance and drive equity, diversity, and inclusion within health initiatives, we must collectively take the following 3 concrete action steps:

- 1. Disrupt
- 2. Defer
- 3. Demand
- Disrupt inequities and health disparities that goes beyond the data
- Defer to the knowledge and expertise of the communities that we serve
- Demand change. That we do better as a system and to always question the underlying assumptions that shape inequities (tackling the root cause of systemic racism and the historical and current mistreatment of communities of color)
  - Through accountability and action moving towards real and sustained change in our daily business operations, that informs and increases the high-quality care our members deserve



### **EDI Inventory**

Using the chat feature, please answer the following prompt:

What steps (or process) can the PIAC take to **meaningfully** drive EDI for members?

What does it look like to you?





### Contact Info

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## Thank you!